

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)**USE FEC MAILING LABEL
OR TYPE OR PRINT**Example: If typing, type
over the lines

MetLife Inc. Employees Pol. Participation Fund A

ADDRESS (number and street)

27-01 Queens Plaza North Area 4-D

☐Check if different
than previously
reported. (ACC)

Long Island City

NY

11101

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00040923

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15
Quarterly Report(Q1)☐July 15
Quarterly Report(Q2)☐October 15
Quarterly Report(Q3)☐January 31
Quarterly Report(YE)☐July 31 Mid-Year
Report(Non-election
Year Only) (MY)☐Termination Report
(TER)(b) Monthly
Report
Due On:☒

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)
(Non-Election
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)
(Non-Election
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the
State of(d) 30-Day
Post -Election
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the
State of

5. Covering Period

01

01

2008

through

01

31

2008

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Timothy J. Ring

Signature of Treasurer

Electronically Filed by Timothy J. Ring

Date

02

19

2008

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office
Use
Only**FEC FORM 3X**
(Rev. 12/2004)

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

MetLife Inc. Employees Pol. Participation Fund A

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	1	0	1	2	0	0	8

To:

M	M	D	D	Y	Y	Y	Y
0	1	3	1	2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 2008		234055.37
(b) Cash on Hand at Beginning of Reporting Period	234055.37	
(c) Total Receipts (from Line 19)	47969.30	47969.30
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	282024.67	282024.67
7. Total Disbursements (from Line 31)	4650.00	4650.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	277374.67	277374.67
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☒ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

MetLife Inc. Employees Pol. Participation Fund A

Report Covering the Period:

From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	8

To:

M	M
0	1

D	D
3	1

Y	Y	Y	Y
2	0	0	8

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	11815.77	11815.77
(i) Itemized (use Schedule A)		
(ii) Unitemized	36153.53	36153.53
(iii) TOTAL (add Lines 11(a)(i) and (ii) ➡	47969.30	47969.30
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) ➡	47969.30	47969.30
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	47969.30	47969.30
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	47969.30	47969.30

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	4650.00	4650.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➡	4650.00	4650.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	4650.00	4650.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	4650.00	4650.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	47969.30	47969.30
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	47969.30	47969.30
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	4650.00	4650.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	4650.00	4650.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 33

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

MetLife Inc. Employees Pol. Participation Fund A

A.

Full Name (Last, First, Middle Initial)

Roy R Anderson

Mailing Address 151 Surrey Lane

City

Dracut

State

MA

Zip Code

01826

FEC ID number of contributing
federal political committee.

C

Name of Employer
Metropolitan Life Insuran-
ce Co

Occupation

Vice-President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.34

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 3 1 / 2 0 0 8

Transaction ID: A2008-87024

Amount of Each Receipt this Period

104.17

B.

Full Name (Last, First, Middle Initial)

William D. Anderson

Mailing Address 56 Birch Run Avenue

City

Denville

State

NJ

Zip Code

07834

FEC ID number of contributing
federal political committee.

C

Name of Employer
Metropolitan Life Insuran-
ce Co

Occupation

Vice-President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.34

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 3 1 / 2 0 0 8

Transaction ID: A2008-87368

Amount of Each Receipt this Period

104.17

C.

Full Name (Last, First, Middle Initial)

Roberto Baron

Mailing Address 28 Stonehenge Rd

City

Manhasset

State

NY

Zip Code

11030

FEC ID number of contributing
federal political committee.

C

Name of Employer
Metropolitan Life Insuran-
ce Co

Occupation

Vice President & Actuary

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.32

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 3 1 / 2 0 0 8

Transaction ID: A2008-87038

Amount of Each Receipt this Period

104.16

SUBTOTAL of Receipts This Page (optional)

312.50

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 33

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MetLife Inc. Employees Pol. Participation Fund A

A.

Full Name (Last, First, Middle Initial)

Susan H Berger

Mailing Address 433 East 56th St

City

New York

State

NY

Zip Code

10022

FEC ID number of contributing
federal political committee.

C

Name of Employer
Metropolitan Life Insuran-
ce Co

Occupation

Vice-President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.32

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 3 1 / 2 0 0 8

Transaction ID: A2008-87324

Amount of Each Receipt this Period

104.16

B.

Full Name (Last, First, Middle Initial)

Bradley Bodell

Mailing Address 536 Ridgewood Ave.

City

Glen Ridge

State

NJ

Zip Code

07028

FEC ID number of contributing
federal political committee.

C

Name of Employer
Metropolitan Life Insuran-
ce Co

Occupation

Vice-President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.32

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 3 1 / 2 0 0 8

Transaction ID: A2008-87017

Amount of Each Receipt this Period

104.16

C.

Full Name (Last, First, Middle Initial)

Duane Bollert

Mailing Address 20 Old Hill Farms Road

City

Westport

State

CT

Zip Code

06880

FEC ID number of contributing
federal political committee.

C

Name of Employer
Metropolitan Life Insuran-
ce Co

Occupation

Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.34

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 3 1 / 2 0 0 8

Transaction ID: A2008-87645

Amount of Each Receipt this Period

104.17

SUBTOTAL of Receipts This Page (optional)

312.49

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 33

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

MetLife Inc. Employees Pol. Participation Fund A

A.

Full Name (Last, First, Middle Initial)

Angelica Cantlon

Mailing Address 741 New Norwalk Rd.

City

New Canaan

State

CT

Zip Code

06840

FEC ID number of contributing
federal political committee.

C

Name of Employer
Metropolitan Life Insuran-
ce Co

Occupation

Senior Vice-President

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

270.82

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	3	1	/	2	0	0	8

Transaction ID: A2008-87346

Amount of Each Receipt this Period

135.41

B.

Full Name (Last, First, Middle Initial)

Gwenn L Carr

Mailing Address 150 East 69th Street

City

New York

State

NY

Zip Code

10021

FEC ID number of contributing
federal political committee.

C

Name of Employer
Metropolitan Life Insuran-
ce Co

Occupation

Senior Vice-President

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	3	1	/	2	0	0	8

Transaction ID: A2008-87048

Amount of Each Receipt this Period

125.00

C.

Full Name (Last, First, Middle Initial)

Paul Cellupica

Mailing Address 250 West 50th Street

City

New York

State

NY

Zip Code

10019

FEC ID number of contributing
federal political committee.

C

Name of Employer
Metropolitan Life Insuran-
ce Co

Occupation

Chief Counsel

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	3	1	/	2	0	0	8

Transaction ID: A2008-86996

Amount of Each Receipt this Period

125.00

SUBTOTAL of Receipts This Page (optional)

385.41

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 33

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MetLife Inc. Employees Pol. Participation Fund A

A.

Full Name (Last, First, Middle Initial)

Gregory Chi

Mailing Address 17484 Highland Way Drive

City

Chesterfield

State

MO

Zip Code

63005

FEC ID number of contributing
federal political committee.

C

Name of Employer
Metropolitan Life Insuran-
ce Co

Occupation

Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

249.99

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 3 1 / 2 0 0 8

Transaction ID: A2008-87616

Amount of Each Receipt this Period

166.66

B.

Full Name (Last, First, Middle Initial)

Richard S Collins

Mailing Address 72 West Brother Drive

City

Greenwich

State

CT

Zip Code

06830

FEC ID number of contributing
federal political committee.

C

Name of Employer
Metropolitan Life Insuran-
ce Co

Occupation

Senior Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.62

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 3 1 / 2 0 0 8

Transaction ID: A2008-87107

Amount of Each Receipt this Period

107.81

C.

Full Name (Last, First, Middle Initial)

Donnalee DeMaio

Mailing Address 8 Hancock Lane

City

Middletown

State

NJ

Zip Code

07748

FEC ID number of contributing
federal political committee.

C

Name of Employer
Metropolitan Life Insuran-
ce Co

Occupation

Sr.VP & President-MetLife Bank

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.34

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 3 1 / 2 0 0 8

Transaction ID: A2008-87582

Amount of Each Receipt this Period

104.17

SUBTOTAL of Receipts This Page (optional)

378.64

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 33

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MetLife Inc. Employees Pol. Participation Fund A

A.

Full Name (Last, First, Middle Initial)

Francis M. Donnantuono

Mailing Address 196 Summit Avenue

City

Summit

State

NJ

Zip Code

07901

FEC ID number of contributing
federal political committee.

C

Name of Employer
Metropolitan Life Insuran-
ce Co

Occupation

Managing Director-FII/PMU

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 3 1 / 2 0 0 8

Transaction ID: A2008-87165

Amount of Each Receipt this Period

125.00

B.

Full Name (Last, First, Middle Initial)

Barbara Duffy

Mailing Address 188 Manhasset Woods Road

City

Manhasset

State

NY

Zip Code

11030

FEC ID number of contributing
federal political committee.

C

Name of Employer
Metropolitan Life Insuran-
ce Co

Occupation

Vice-President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.32

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 3 1 / 2 0 0 8

Transaction ID: A2008-87010

Amount of Each Receipt this Period

104.16

C.

Full Name (Last, First, Middle Initial)

Joseph L Dunn

Mailing Address 18 Fenimore Road

City

Scarsdale

State

NY

Zip Code

10583

FEC ID number of contributing
federal political committee.

C

Name of Employer
Metropolitan Life Insuran-
ce Co

Occupation

Vice President & Sr. Actuary

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.34

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 3 1 / 2 0 0 8

Transaction ID: A2008-87136

Amount of Each Receipt this Period

104.17

SUBTOTAL of Receipts This Page (optional)

333.33

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 33

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MetLife Inc. Employees Pol. Participation Fund A

A.

Full Name (Last, First, Middle Initial)

Michael Ehrenzweig

Mailing Address 43 Lent Drive

City

Plainview

State

NY

Zip Code

11803

FEC ID number of contributing
federal political committee.

C

Name of Employer
Metropolitan Life Insuran-
ce Co

Occupation

Vice-President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.32

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 3 1 / 2 0 0 8

Transaction ID: A2008-87304

Amount of Each Receipt this Period

104.16

B.

Full Name (Last, First, Middle Initial)

Michael K Farrell

Mailing Address PO Box 52

City

New Vernon

State

NJ

Zip Code

07976

FEC ID number of contributing
federal political committee.

C

Name of Employer
Metropolitan Life Insuran-
ce Co

Occupation

Executive Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.33

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 1 5 / 2 0 0 8

Transaction ID: A2008-46192

Amount of Each Receipt this Period

208.33

C.

Full Name (Last, First, Middle Initial)

Michael K Farrell

Mailing Address PO Box 52

City

New Vernon

State

NJ

Zip Code

07976

FEC ID number of contributing
federal political committee.

C

Name of Employer
Metropolitan Life Insuran-
ce Co

Occupation

Executive Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.66

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 3 1 / 2 0 0 8

Transaction ID: A2008-87023

Amount of Each Receipt this Period

208.33

SUBTOTAL of Receipts This Page (optional)

520.82

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 33

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MetLife Inc. Employees Pol. Participation Fund A

A.

Full Name (Last, First, Middle Initial)

Margaret C Fechtmann

Mailing Address 420 East 23rd Street

City

New York

State

NY

Zip Code

10010

FEC ID number of contributing
federal political committee.

C

Name of Employer
Metropolitan Life Insuran-
ce Co

Occupation

Executive Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.33

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 1 5 / 2 0 0 8

Transaction ID: A2008-46286

Amount of Each Receipt this Period

208.33

B.

Full Name (Last, First, Middle Initial)

Margaret C Fechtmann

Mailing Address 420 East 23rd Street

City

New York

State

NY

Zip Code

10010

FEC ID number of contributing
federal political committee.

C

Name of Employer
Metropolitan Life Insuran-
ce Co

Occupation

Executive Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.66

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 3 1 / 2 0 0 8

Transaction ID: A2008-87117

Amount of Each Receipt this Period

208.33

C.

Full Name (Last, First, Middle Initial)

Aaron Fried

Mailing Address 162 Slocum Crescent

City

Forest Hills

State

NY

Zip Code

11375

FEC ID number of contributing
federal political committee.

C

Name of Employer
Metropolitan Life Insuran-
ce Co

Occupation

Vice President & Actuary

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.34

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 3 1 / 2 0 0 8

Transaction ID: A2008-87500

Amount of Each Receipt this Period

104.17

SUBTOTAL of Receipts This Page (optional)

520.83

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 33

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MetLife Inc. Employees Pol. Participation Fund A

A.

Full Name (Last, First, Middle Initial)

Ira Friedman

Mailing Address 130 Chadwick Road

City

Teaneck

State

NJ

Zip Code

07666

FEC ID number of contributing
federal political committee.

C

Name of Employer
Metropolitan Life Insuran-
ce Co

Occupation

Senior Vice President

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 3 1 / 2 0 0 8

Transaction ID: A2008-87270

Amount of Each Receipt this Period

130.00

B.

Full Name (Last, First, Middle Initial)

Ms. Mira Graetz-Ball

Mailing Address 4 Peter Cooper Road

City

New York

State

NY

Zip Code

10010

FEC ID number of contributing
federal political committee.

C

Name of Employer
Metropolitan Life Insuran-
ce Co

Occupation

Managing Director

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

208.34

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 3 1 / 2 0 0 8

Transaction ID: A2008-87192

Amount of Each Receipt this Period

104.17

C.

Full Name (Last, First, Middle Initial)

Nancy Hanslowe

Mailing Address 105 East Central Avenue

City

Wharton

State

NJ

Zip Code

07885

FEC ID number of contributing
federal political committee.

C

Name of Employer
Metropolitan Life Insuran-
ce Co

Occupation

Vice President

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

208.32

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 3 1 / 2 0 0 8

Transaction ID: A2008-87011

Amount of Each Receipt this Period

104.16

SUBTOTAL of Receipts This Page (optional)

338.33

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 33

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MetLife Inc. Employees Pol. Participation Fund A

A.

Full Name (Last, First, Middle Initial)

Kathleen A Henkel

Mailing Address 43 the Glen

City

Tamiment

State

PA

Zip Code

18371

FEC ID number of contributing
federal political committee.

C

Name of Employer
Metropolitan Life Insuran-
ce Co

Occupation

Senior Vice-President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 3 1 / 2 0 0 8

Transaction ID: A2008-87316

Amount of Each Receipt this Period

125.00

B.

Full Name (Last, First, Middle Initial)

James N Heston

Mailing Address 41 Franklin School Way

City

Metuchen

State

NJ

Zip Code

08840

FEC ID number of contributing
federal political committee.

C

Name of Employer
Metropolitan Life Insuran-
ce Co

Occupation

Executive Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.33

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 1 5 / 2 0 0 8

Transaction ID: A2008-46470

Amount of Each Receipt this Period

208.33

C.

Full Name (Last, First, Middle Initial)

James N Heston

Mailing Address 41 Franklin School Way

City

Metuchen

State

NJ

Zip Code

08840

FEC ID number of contributing
federal political committee.

C

Name of Employer
Metropolitan Life Insuran-
ce Co

Occupation

Executive Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.66

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 3 1 / 2 0 0 8

Transaction ID: A2008-87301

Amount of Each Receipt this Period

208.33

SUBTOTAL of Receipts This Page (optional)

541.66

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 33

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MetLife Inc. Employees Pol. Participation Fund A

A.

Full Name (Last, First, Middle Initial)

James Hunt

Mailing Address 310 West 72 Street Apt.7D

City

New York

State

NY

Zip Code

10023

FEC ID number of contributing
federal political committee.

C

Name of Employer
Metropolitan Life Insuran-
ce Co

Occupation

Associate General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.32

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 3 1 / 2 0 0 8

Transaction ID: A2008-87508

Amount of Each Receipt this Period

104.16

B.

Full Name (Last, First, Middle Initial)

Sibyl C Jacobson

Mailing Address 510 East 23rd Street Apt 14B

City

New York

State

NY

Zip Code

10010

FEC ID number of contributing
federal political committee.

C

Name of Employer
Metropolitan Life Insuran-
ce Co

Occupation

Senior Vice-President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.76

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 3 1 / 2 0 0 8

Transaction ID: A2008-87382

Amount of Each Receipt this Period

115.38

C.

Full Name (Last, First, Middle Initial)

Jennifer J Kalb

Mailing Address 110 St. Marks Avenue

City

Brooklyn

State

NY

Zip Code

11217

FEC ID number of contributing
federal political committee.

C

Name of Employer
Metropolitan Life Insuran-
ce Co

Occupation

Associate General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.34

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 3 1 / 2 0 0 8

Transaction ID: A2008-87106

Amount of Each Receipt this Period

104.17

SUBTOTAL of Receipts This Page (optional)

323.71

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 / 33

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MetLife Inc. Employees Pol. Participation Fund A

A.

Full Name (Last, First, Middle Initial)

Steven Kandarian

Mailing Address 25 Lenox Road

City

Summit

State

NJ

Zip Code

07901

FEC ID number of contributing
federal political committee.

C

Name of Employer
Metropolitan Life Insuran-
ce Co

Occupation

Executive Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.33

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 1 5 / 2 0 0 8

Transaction ID: A2008-46601

Amount of Each Receipt this Period

208.33

B.

Full Name (Last, First, Middle Initial)

Steven Kandarian

Mailing Address 25 Lenox Road

City

Summit

State

NJ

Zip Code

07901

FEC ID number of contributing
federal political committee.

C

Name of Employer
Metropolitan Life Insuran-
ce Co

Occupation

Executive Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.66

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 3 1 / 2 0 0 8

Transaction ID: A2008-87431

Amount of Each Receipt this Period

208.33

C.

Full Name (Last, First, Middle Initial)

Todd B Katz

Mailing Address 11 Graniks Way

City

Suffern

State

NY

Zip Code

10901

FEC ID number of contributing
federal political committee.

C

Name of Employer
Metropolitan Life Insuran-
ce Co

Occupation

Senior Vice-President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 3 1 / 2 0 0 8

Transaction ID: A2008-87082

Amount of Each Receipt this Period

125.00

SUBTOTAL of Receipts This Page (optional)

541.66

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 / 33

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MetLife Inc. Employees Pol. Participation Fund A

A.

Full Name (Last, First, Middle Initial)

Juliane Kowalski

Mailing Address 2770 Judith Drive

City

Bellmore

State

NY

Zip Code

11710

FEC ID number of contributing
federal political committee.

C

Name of Employer
Metropolitan Life Insuran-
ce Co

Occupation

Associate General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.34

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 3 1 / 2 0 0 8

Transaction ID: A2008-87506

Amount of Each Receipt this Period

104.17

B.

Full Name (Last, First, Middle Initial)

Lisa Kuklinski

Mailing Address 370 First Avenue

City

New York

State

NY

Zip Code

10010

FEC ID number of contributing
federal political committee.

C

Name of Employer
Metropolitan Life Insuran-
ce Co

Occupation

Vice-President & Actuary

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.32

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 3 1 / 2 0 0 8

Transaction ID: A2008-87365

Amount of Each Receipt this Period

104.16

C.

Full Name (Last, First, Middle Initial)

Paul LaPiana

Mailing Address 18 Mikro

City

Laguna Niguel

State

CA

Zip Code

92677

FEC ID number of contributing
federal political committee.

C

Name of Employer
Metropolitan Life Insuran-
ce Co

Occupation

Director-Nat'l Sls Mgr-Life

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.32

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 3 1 / 2 0 0 8

Transaction ID: A2008-87579

Amount of Each Receipt this Period

104.16

SUBTOTAL of Receipts This Page (optional)

312.49

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 / 33

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MetLife Inc. Employees Pol. Participation Fund A

A.

Full Name (Last, First, Middle Initial)

Nicholas D. Latrenta

Mailing Address 11 Blue Sky Lane

City

Montvale

State

NJ

Zip Code

07645

FEC ID number of contributing
federal political committee.

C

Name of Employer
Metropolitan Life Insuran-
ce Co

Occupation

Senior Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 3 1 / 2 0 0 8

Transaction ID: A2008-87297

Amount of Each Receipt this Period

120.00

B.

Full Name (Last, First, Middle Initial)

James L Lipscomb

Mailing Address One Legend Court

City

Purchase

State

NY

Zip Code

10577

FEC ID number of contributing
federal political committee.

C

Name of Employer
Metropolitan Life Insuran-
ce Co

Occupation

Executive Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.33

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 1 5 / 2 0 0 8

Transaction ID: A2008-46437

Amount of Each Receipt this Period

208.33

C.

Full Name (Last, First, Middle Initial)

James L Lipscomb

Mailing Address One Legend Court

City

Purchase

State

NY

Zip Code

10577

FEC ID number of contributing
federal political committee.

C

Name of Employer
Metropolitan Life Insuran-
ce Co

Occupation

Executive Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.66

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 3 1 / 2 0 0 8

Transaction ID: A2008-87268

Amount of Each Receipt this Period

208.33

SUBTOTAL of Receipts This Page (optional)

536.66

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 19 / 33

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MetLife Inc. Employees Pol. Participation Fund A

A.

Full Name (Last, First, Middle Initial)

Mr. Ronald E Long

Mailing Address Scaife Road

City

Sewickley

State

PA

Zip Code

15143

FEC ID number of contributing
federal political committee.

C

Name of Employer
Metropolitan Life Insuran-
ce Co

Occupation

Managing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 1 4 / 2 0 0 8

Transaction ID: A2008-21305

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)

Robert F Lundgren

Mailing Address 77 Holly Hill Lane

City

Saunders town

State

RI

Zip Code

02874

FEC ID number of contributing
federal political committee.

C

Name of Employer
Metropolitan Property & Cas-
ualty

Occupation

Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.32

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 3 1 / 2 0 0 8

Transaction ID: A2008-87204

Amount of Each Receipt this Period

104.16

C.

Full Name (Last, First, Middle Initial)

John McCallion

Mailing Address 63 N. Sunnycrest Drive

City

Little Silver

State

NJ

Zip Code

07739

FEC ID number of contributing
federal political committee.

C

Name of Employer
Metropolitan Life Insuran-
ce Co

Occupation

Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.34

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 3 1 / 2 0 0 8

Transaction ID: A2008-87637

Amount of Each Receipt this Period

104.17

SUBTOTAL of Receipts This Page (optional)

708.33

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 20 / 33

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MetLife Inc. Employees Pol. Participation Fund A

A.

Full Name (Last, First, Middle Initial)

Robert R Merck

Mailing Address 12 Howell Dr

City

Far Hills

State

NJ

Zip Code

07931

FEC ID number of contributing
federal political committee.

C

Name of Employer
Metropolitan Life Insurance Co

Occupation

Managing Director-Real Estate

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 3 1 / 2 0 0 8

Transaction ID: A2008-87162

Amount of Each Receipt this Period

125.00

B.

Full Name (Last, First, Middle Initial)

William D Moore

Mailing Address 4 Longfellow Place

City

Boston

State

MA

Zip Code

02114

FEC ID number of contributing
federal political committee.

C

Name of Employer
Metropolitan Property & Casualty

Occupation

Senior Vice-President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.33

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 1 5 / 2 0 0 8

Transaction ID: A2008-46409

Amount of Each Receipt this Period

208.33

C.

Full Name (Last, First, Middle Initial)

William D Moore

Mailing Address 4 Longfellow Place

City

Boston

State

MA

Zip Code

02114

FEC ID number of contributing
federal political committee.

C

Name of Employer
Metropolitan Property & Casualty

Occupation

Senior Vice-President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.66

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 3 1 / 2 0 0 8

Transaction ID: A2008-87240

Amount of Each Receipt this Period

208.33

SUBTOTAL of Receipts This Page (optional)

541.66

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 21 / 33

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MetLife Inc. Employees Pol. Participation Fund A

A.

Full Name (Last, First, Middle Initial)

Maria R Morris

Mailing Address 726 Standish Avenue

City

Westfield

State

NJ

Zip Code

07090

FEC ID number of contributing
federal political committee.

C

Name of Employer
Metropolitan Life Insuran-
ce Co

Occupation

Executive Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.33

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 1 5 / 2 0 0 8

Transaction ID: A2008-46351

Amount of Each Receipt this Period

208.33

B.

Full Name (Last, First, Middle Initial)

Maria R Morris

Mailing Address 726 Standish Avenue

City

Westfield

State

NJ

Zip Code

07090

FEC ID number of contributing
federal political committee.

C

Name of Employer
Metropolitan Life Insuran-
ce Co

Occupation

Executive Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.66

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 3 1 / 2 0 0 8

Transaction ID: A2008-87182

Amount of Each Receipt this Period

208.33

C.

Full Name (Last, First, Middle Initial)

William J. Mullaney

Mailing Address 14 Roc Etam Road

City

Randolph

State

NJ

Zip Code

07869

FEC ID number of contributing
federal political committee.

C

Name of Employer
Metropolitan Life Insuran-
ce Co

Occupation

Executive Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.33

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 1 5 / 2 0 0 8

Transaction ID: A2008-46332

Amount of Each Receipt this Period

208.33

SUBTOTAL of Receipts This Page (optional)

624.99

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 22 / 33

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MetLife Inc. Employees Pol. Participation Fund A

A.

Full Name (Last, First, Middle Initial)

William J. Mullaney

Mailing Address 14 Roc Etam Road

City

Randolph

State

NJ

Zip Code

07869

FEC ID number of contributing
federal political committee.

C

Name of Employer
Metropolitan Life Insuran-
ce Co

Occupation

Executive Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.66

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 3 1 / 2 0 0 8

Transaction ID: A2008-87163

Amount of Each Receipt this Period

208.33

B.

Full Name (Last, First, Middle Initial)

Gaetan Nicolas

Mailing Address 77 Raffaele Dr.

City

Waltham

State

MA

Zip Code

02452

FEC ID number of contributing
federal political committee.

C

Name of Employer
Metropolitan Life Insuran-
ce Co

Occupation

Vice-President & Actuary

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.32

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 3 1 / 2 0 0 8

Transaction ID: A2008-87249

Amount of Each Receipt this Period

104.16

C.

Full Name (Last, First, Middle Initial)

Anthony J Nugent

Mailing Address 2515 Brickfield Court

City

Thousand Oaks

State

CA

Zip Code

91362

FEC ID number of contributing
federal political committee.

C

Name of Employer
Metropolitan Life Insuran-
ce Co

Occupation

Senior Vice-President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 3 1 / 2 0 0 8

Transaction ID: A2008-87199

Amount of Each Receipt this Period

125.00

SUBTOTAL of Receipts This Page (optional)

437.49

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 23 / 33

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MetLife Inc. Employees Pol. Participation Fund A

A.

Full Name (Last, First, Middle Initial)

James R Petrosini

Mailing Address 23 Appletree Road

City

Flemington

State

NJ

Zip Code

08822

FEC ID number of contributing
federal political committee.

C

Name of Employer
Metropolitan Life Insuran-
ce Co

Occupation

Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.32

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 3 1 / 2 0 0 8

Transaction ID: A2008-87114

Amount of Each Receipt this Period

104.16

B.

Full Name (Last, First, Middle Initial)

Georgette A Piligian

Mailing Address 9 Landing Lane

City

West Islip

State

NY

Zip Code

11795

FEC ID number of contributing
federal political committee.

C

Name of Employer
Metropolitan Life Insuran-
ce Co

Occupation

Senior Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 3 1 / 2 0 0 8

Transaction ID: A2008-87075

Amount of Each Receipt this Period

125.00

C.

Full Name (Last, First, Middle Initial)

Louis J Ragusa

Mailing Address 10 Jason Court

City

Dix Hills

State

NY

Zip Code

11746

FEC ID number of contributing
federal political committee.

C

Name of Employer
Metropolitan Life Insuran-
ce Co

Occupation

Executive Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.33

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 1 5 / 2 0 0 8

Transaction ID: A2008-46350

Amount of Each Receipt this Period

208.33

SUBTOTAL of Receipts This Page (optional)

437.49

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 24 / 33

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MetLife Inc. Employees Pol. Participation Fund A

A.

Full Name (Last, First, Middle Initial)

Louis J Ragusa

Mailing Address 10 Jason Court

City

Dix Hills

State

NY

Zip Code

11746

FEC ID number of contributing
federal political committee.

C

Name of Employer
Metropolitan Life Insurance Co

Occupation

Executive Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.66

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 3 1 / 2 0 0 8

Transaction ID: A2008-87181

Amount of Each Receipt this Period

208.33

B.

Full Name (Last, First, Middle Initial)

Catherine A. Rein

Mailing Address 21 East 22nd St Apt 8B

City

New York

State

NY

Zip Code

10010

FEC ID number of contributing
federal political committee.

C

Name of Employer
Metropolitan Property & Casualty

Occupation

Senior Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.33

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 1 5 / 2 0 0 8

Transaction ID: A2008-46354

Amount of Each Receipt this Period

208.33

C.

Full Name (Last, First, Middle Initial)

Catherine A. Rein

Mailing Address 21 East 22nd St Apt 8B

City

New York

State

NY

Zip Code

10010

FEC ID number of contributing
federal political committee.

C

Name of Employer
Metropolitan Property & Casualty

Occupation

Senior Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.66

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 3 1 / 2 0 0 8

Transaction ID: A2008-87185

Amount of Each Receipt this Period

208.33

SUBTOTAL of Receipts This Page (optional)

624.99

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 25 / 33

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MetLife Inc. Employees Pol. Participation Fund A

A.

Full Name (Last, First, Middle Initial)

Kurt Riedener

Mailing Address 21 Fern Road

City

Sparta

State

NJ

Zip Code

07871

FEC ID number of contributing
federal political committee.

C

Name of Employer
Metropolitan Life Insuran-
ce Co

Occupation

Vice-President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.32

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 3 1 / 2 0 0 8

Transaction ID: A2008-87388

Amount of Each Receipt this Period

104.16

B.

Full Name (Last, First, Middle Initial)

Teresa Roseborough

Mailing Address 1356 High Falls Court SW

City

Atlanta

State

GA

Zip Code

30311

FEC ID number of contributing
federal political committee.

C

Name of Employer
Metropolitan Life Insuran-
ce Co

Occupation

Chief Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

287.50

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 3 1 / 2 0 0 8

Transaction ID: A2008-87629

Amount of Each Receipt this Period

143.75

C.

Full Name (Last, First, Middle Initial)

Jonathan L Rosenthal

Mailing Address 210 Woods End Drive

City

Basking Ridge

State

NJ

Zip Code

07920

FEC ID number of contributing
federal political committee.

C

Name of Employer
Metropolitan Life Insuran-
ce Co

Occupation

Managing Director-FII/PMU

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

203.12

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 3 1 / 2 0 0 8

Transaction ID: A2008-87171

Amount of Each Receipt this Period

101.56

SUBTOTAL of Receipts This Page (optional)

349.47

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 26 / 33

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MetLife Inc. Employees Pol. Participation Fund A

A.

Full Name (Last, First, Middle Initial)

Timothy Schmidt

Mailing Address 12 Spring Lake Drive

City

Far Hills

State

NJ

Zip Code

07931

FEC ID number of contributing
federal political committee.

C

Name of Employer
Metropolitan Life Insuran-
ce Co

Occupation

Senior Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 3 1 / 2 0 0 8

Transaction ID: A2008-86995

Amount of Each Receipt this Period

125.00

B.

Full Name (Last, First, Middle Initial)

Michael H Schwartz

Mailing Address 36 Yarmouth Drive

City

New Providence

State

NJ

Zip Code

07974

FEC ID number of contributing
federal political committee.

C

Name of Employer
Metropolitan Life Insuran-
ce Co

Occupation

Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.34

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 3 1 / 2 0 0 8

Transaction ID: A2008-87110

Amount of Each Receipt this Period

104.17

C.

Full Name (Last, First, Middle Initial)

Sachin N. Shah

Mailing Address 4 Dutch Lane

City

Scotch Plains

State

NJ

Zip Code

07076

FEC ID number of contributing
federal political committee.

C

Name of Employer
Metropolitan Life Insuran-
ce Co

Occupation

Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.34

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 3 1 / 2 0 0 8

Transaction ID: A2008-87044

Amount of Each Receipt this Period

104.17

SUBTOTAL of Receipts This Page (optional)

333.34

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 27 / 33

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MetLife Inc. Employees Pol. Participation Fund A

A.

Full Name (Last, First, Middle Initial)

Steven Sheinheit

Mailing Address 20 Sunbeam Road

City

Syosset

State

NY

Zip Code

11791

FEC ID number of contributing
federal political committee.

C

Name of Employer
Metropolitan Life Insuran-
ce Co

Occupation

Executive Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.33

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 1 5 / 2 0 0 8

Transaction ID: A2008-46188

Amount of Each Receipt this Period

208.33

B.

Full Name (Last, First, Middle Initial)

Steven Sheinheit

Mailing Address 20 Sunbeam Road

City

Syosset

State

NY

Zip Code

11791

FEC ID number of contributing
federal political committee.

C

Name of Employer
Metropolitan Life Insuran-
ce Co

Occupation

Executive Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.66

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 3 1 / 2 0 0 8

Transaction ID: A2008-87019

Amount of Each Receipt this Period

208.33

C.

Full Name (Last, First, Middle Initial)

Eric T Steigerwalt

Mailing Address 160 Fox Chase Rd.

City

Chester

State

NJ

Zip Code

07930

FEC ID number of contributing
federal political committee.

C

Name of Employer
Metropolitan Life Insuran-
ce Co

Occupation

Senior Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.76

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 3 1 / 2 0 0 8

Transaction ID: A2008-87122

Amount of Each Receipt this Period

115.38

SUBTOTAL of Receipts This Page (optional)

532.04

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 28 / 33

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MetLife Inc. Employees Pol. Participation Fund A

A.

Full Name (Last, First, Middle Initial)

Donald Swanson

Mailing Address 214 S B Rees Rd

City

Kerrville

State

TX

Zip Code

78028

FEC ID number of contributing
federal political committee.

C

Name of Employer
Metropolitan Life Insuran-
ce Co

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

Senior Vice President

Aggregate Year-to-Date ▼

208.34

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 3 1 / 2 0 0 8

Transaction ID: A2008-87581

Amount of Each Receipt this Period

104.17

B.

Full Name (Last, First, Middle Initial)

Stanley J. Talbi

Mailing Address 527 Sayre Drive

City

Princeton

State

NJ

Zip Code

08540

FEC ID number of contributing
federal political committee.

C

Name of Employer
Metropolitan Life Insuran-
ce Co

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

Executive Vice President

Aggregate Year-to-Date ▼

333.32

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 3 1 / 2 0 0 8

Transaction ID: A2008-87285

Amount of Each Receipt this Period

166.66

C.

Full Name (Last, First, Middle Initial)

Mr. William Toppeta

Mailing Address 158 East 66th Street

City

New York

State

NY

Zip Code

10021

FEC ID number of contributing
federal political committee.

C

Name of Employer
Metropolitan Life Insuran-
ce Co

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

President International

Aggregate Year-to-Date ▼

208.33

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 1 5 / 2 0 0 8

Transaction ID: A2008-46450

Amount of Each Receipt this Period

208.33

SUBTOTAL of Receipts This Page (optional)

479.16

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 29 / 33

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MetLife Inc. Employees Pol. Participation Fund A

A.

Full Name (Last, First, Middle Initial)

Mr. William Toppeta

Mailing Address 158 East 66th Street

City

New York

State

NY

Zip Code

10021

FEC ID number of contributing
federal political committee.

C

Name of Employer
Metropolitan Life Insuran-
ce Co

Occupation

President International

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.66

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 3 1 / 2 0 0 8

Transaction ID: A2008-87281

Amount of Each Receipt this Period

208.33

B.

Full Name (Last, First, Middle Initial)

John R Tremmel

Mailing Address 834 Hawk Run Trail

City

O'Fallon

State

MO

Zip Code

63368

FEC ID number of contributing
federal political committee.

C

Name of Employer
Metropolitan Life Insuran-
ce Co

Occupation

Vice-President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 3 1 / 2 0 0 8

Transaction ID: A2008-87041

Amount of Each Receipt this Period

104.00

C.

Full Name (Last, First, Middle Initial)

Sharon E. Waters

Mailing Address 15 Suffolk Lane

City

Princeton Junction

State

NJ

Zip Code

08550

FEC ID number of contributing
federal political committee.

C

Name of Employer
Metropolitan Life Insuran-
ce Co

Occupation

Vice-President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.34

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 3 1 / 2 0 0 8

Transaction ID: A2008-87166

Amount of Each Receipt this Period

104.17

SUBTOTAL of Receipts This Page (optional)

416.50

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 30 / 33

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MetLife Inc. Employees Pol. Participation Fund A

A.

Full Name (Last, First, Middle Initial)

Lisa M Weber

Mailing Address 196 Anderson Avenue

City

State

Zip Code

Closter

NJ

07624

FEC ID number of contributing
federal political committee.

C

Name of Employer
Metropolitan Life Insuran-
ce Co

Occupation
President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.33

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 1 5 / 2 0 0 8

Transaction ID: A2008-46288

Amount of Each Receipt this Period

208.33

B.

Full Name (Last, First, Middle Initial)

Lisa M Weber

Mailing Address 196 Anderson Avenue

City

State

Zip Code

Closter

NJ

07624

FEC ID number of contributing
federal political committee.

C

Name of Employer
Metropolitan Life Insuran-
ce Co

Occupation
President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.66

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 3 1 / 2 0 0 8

Transaction ID: A2008-87119

Amount of Each Receipt this Period

208.33

C.

Full Name (Last, First, Middle Initial)

William J Wheeler

Mailing Address 147 Brite Avenue

City

State

Zip Code

Scarsdale

NY

10583

FEC ID number of contributing
federal political committee.

C

Name of Employer
Metropolitan Life Insuran-
ce Co

Occupation
Executive Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.33

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 1 5 / 2 0 0 8

Transaction ID: A2008-46550

Amount of Each Receipt this Period

208.33

SUBTOTAL of Receipts This Page (optional)

624.99

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 31 / 33

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MetLife Inc. Employees Pol. Participation Fund A

A.

Full Name (Last, First, Middle Initial)

William J Wheeler

Mailing Address 147 Brite Avenue

City

Scarsdale

State

NY

Zip Code

10583

FEC ID number of contributing
federal political committee.

C

Name of Employer
Metropolitan Life Insurance Co

Occupation

Executive Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.66

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 3 1 / 2 0 0 8

Transaction ID: A2008-87380

Amount of Each Receipt this Period

208.33

B.

Full Name (Last, First, Middle Initial)

Albert G Woodring

Mailing Address 1370 Timberlake Manor Parkway

City

Chesterfield

State

MO

Zip Code

63017

FEC ID number of contributing
federal political committee.

C

Name of Employer
RGA Reinsurance Company

Occupation

Pres. And CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

276.92

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 2 5 / 2 0 0 8

Transaction ID: A2008-257721

Amount of Each Receipt this Period

138.46

SUBTOTAL of Receipts This Page (optional)

346.79

TOTAL This Period (last page this line number only)

11815.77

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 32 / 33

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

MetLife Inc. Employees Pol. Participation Fund A

A.

Full Name (Last, First, Middle Initial)

Metropolitan Life Insurance Company

Mailing Address One MetLife Plaza 27-01 Queens Plz

City
Long Island City

State
NY

Zip Code
11101

Purpose of Disbursement
Admin expen-reimbursement

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: NY

District:

Disbursement For: 2007
☐ Primary ☐ General
☒ Other (specify) ▼

Not Applicable

Transaction ID: B207406

Date of Disbursement

MM / DD / YYYY
01 / 10 / 2008

Amount of Each Disbursement this Period

4650.00

SUBTOTAL of Disbursements This Page (optional)

4650.00

TOTAL This Period (last page this line number only)

4650.00

Form/Schedule: **SA11AI**

Transaction ID:

Please note that the PAC is aware that we follow an alternate method of itemizing payroll receipts rather than the suggested manner of disclosing a single total for the reporting period along with the amount deducted per pay period. Because the amounts collected per pay period may change often during the time covered by a single report, we find that reporting individual deductions separately more accurately discloses how the receipts are collected.
